



MUETING RAASCH GEBHARDT

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07/15/2004

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08/19/2004 MAHNE2 00000079 134895 09600432

01 FC:2501 665.00 DA  
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The undersigned hereby certifies that this paper is being transmitted by facsimile in accordance with 37 CFR § 1.6(d) to the Patent and Trademark Office, addressed to: Commissioner for Patents, Mail Stop Issue Fee, P.O. Box 1450, Alexandria, VA 22313-1450, on this 18 day of August, 2004, at 4:30 PM (Central Time).

*Nancy A. Johnson*  
Name: Nancy A. Johnson

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/600,432	10/02/2000	James B. McCarthy	110.01130101	3387

TITLE OF INVENTION: PEPTIDES WITH BETA1 INTEGRIN SUBUNIT DEPENDENT CELL ADHESION MODULATING ACTIVITY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	<u>no</u> yes	<u>\$1250</u> 445.	\$0	<u>445.</u>	10/15/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
LUKTON, DAVID	1653	514-019000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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1 Mueeting Raasch &amp;

2 Gebhardt, P.A.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

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MINNEAPOLIS, MINNESOTA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 13

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-4895 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

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(Authorized Signature) *Ann M. Mueeting*  
Ann M. Mueeting Reg. No. 33,977 Aug. 18, 2004

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